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## BIB DATA SHEET

CONFIRMATION NO. 5974

|  |   |  |                                 |  |                           |                                |
|--|---|--|---------------------------------|--|---------------------------|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/824,301   | <b>FILING or 371(c) DATE</b><br>04/14/2004<br><b>RULE</b>   | <b>CLASS</b><br>307                                      | <b>GROUP ART UNIT</b><br>2836   | <b>ATTORNEY DOCKET NO.</b><br>TINK 3.0-023                   |                           |                                |
| <b>APPLICANTS</b><br>John Gentile, Montclair, NJ;<br>Anthony Gentile, New York, NY;<br>Terrance Z. Kaiserman, Loxahatchee, FL;<br><b>** CONTINUING DATA *****</b><br><b>** FOREIGN APPLICATIONS *****</b><br><b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b><br>06/22/2004 |   |  |                                 |  |                           |                                |
| Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Verified and /ROBERT L DEBERADINIS/<br>Acknowledged Examiner's Signature                         |   | <input type="checkbox"/> Met after Allowance<br>Initials | <b>STATE OR COUNTRY</b><br>NJ   | <b>SHEETS DRAWINGS</b><br>4                                  | <b>TOTAL CLAIMS</b><br>32 | <b>INDEPENDENT CLAIMS</b><br>3 |
| <b>ADDRESS</b><br>LERNER, DAVID, LITTENBERG,<br>KRUMHOLZ & MENTLIK<br>600 SOUTH AVENUE WEST<br>WESTFIELD, NJ 07090<br>UNITED STATES  |   |  |                                 |  |                           |                                |
| <b>TITLE</b><br>Electronic switch system with continuous design  |   |  |                                 |  |                           |                                |
| <b>FILING FEE RECEIVED</b><br>986  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |  |                                 | <input type="checkbox"/> All Fees                            |                           |                                |
|  |   |  |                                 | <input type="checkbox"/> 1.16 Fees (Filing)                  |                           |                                |
|  |   |  |                                 | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) |                           |                                |
|  |   |  |                                 | <input type="checkbox"/> 1.18 Fees (Issue)                   |                           |                                |
|  |   |  |                                 | <input type="checkbox"/> Other _____                         |                           |                                |
|  |   |  | <input type="checkbox"/> Credit |  |                           |                                |